

Clark & Elbing LLP

101 Federal Street
Boston, MA 02110

Telephone 617-428-0200
Facsimile 617-428-7045
617-428-7046

Date: May 10, 2005

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Facsimile No.: 703-872-9306

From: Susan M. Michaud, Ph.D.
Reg. No. 42,885

Re: U.S. Patent Application No. 10/737,270
Attorney Docket No. 06132/045004

Pages: 7

**RECEIVED
CENTRAL FAX CENTER
MAY 10 2005**

NOTICE: This facsimile transmission may contain confidential or privileged information intended for the addressee only. If you are not the addressee, be aware that any disclosure, copying, distribution, or use of the information is prohibited. If you have received this facsimile transmission in error, please call us at 617-428-0200 to arrange for its return at no cost to you.

PATENT
ATTORNEY DOCKET NO. 06132/045004

Certificate of Facsimile Transmission

Date of Transmission: May 10, 2005

I hereby certify that this correspondence is being transmitted by facsimile to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450; Facsimile No. 703-872-9306.



Printed Name of Person Sending Transmission



Signature of Person Sending Transmission

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	William D. Thomas Jr. et al.	Art Unit:	1645
Serial No.:	10/737,270	Examiner:	L. Tongue
Filed:	December 16, 2003	Customer No.:	21559
Title:	Passive Immunization Against Clostridium Difficile Disease		

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Transmittal of Substitute Combined Declaration and Power of Attorney

Transmitted herewith is a Combined Declaration and Power of Attorney document for the above-captioned application, which is to replace that which was filed in this case on December 16, 2003.

05-10-05

16:23

From-CLARK & ELBING LLP

+6174287023

T-927 P.003/007 F-805

Although no fees are believed to be due, if there are any additional charges or any credits, please apply them to Deposit Account No. 03-2095.

Respectfully submitted,

Date: May 6, 2005

Susan M. Michaud
Susan M. Michaud, Ph.D.
Reg. No. 42,885

Clark & Elbing LLP
101 Federal Street
Boston, MA 02110
Telephone: 617-428-0200
Facsimile: 617-428-7045

RECEIVED
CENTRAL FAX CENTER

MAY 10 2005

PATENT
ATTORNEY DOCKET NO. 06132/046004

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled "Passive Immunization Against Clostridium Difficile Disease" the specification of which was filed December 16, 2003 and was assigned U.S. Serial No. 10/797,270.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with 37 C.F.R. § 1.56.

FOREIGN PRIORITY RIGHTS: I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or (f), or § 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below, and have also identified below any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Country	Serial Number	Filing Date	Priority Claimed?
			Yes/No

PROVISIONAL PRIORITY RIGHTS: I hereby claim priority benefits under 35 U.S.C. § 119(e) of any United States provisional patent application(s) listed below filed by an inventor or inventors on the same subject matter as the present application and having a filing date before that of the application(s) of which priority is claimed:

Serial Number	Filing Date	Status
60/082,522	October 20, 1997	Abandoned

NON-PROVISIONAL PRIORITY RIGHTS: I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose all information I know to be material to patentability as defined in 37 C.F.R. § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

Serial Number	Filing Date	Status
09/176,076	October 20, 1998	Granted
09/815,452	March 22, 2001	Granted

I hereby appoint the attorneys and/or agents associated with customer number 21559 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

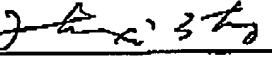
Address all correspondence relating to this application to the address associated with customer number 21559.

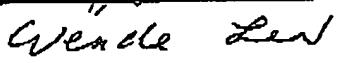
Address all telephone calls to: Susan M. Michaud, Ph.D. at 617-428-0200.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name (First, Middle, Last)	Residence Address (City, State, Country)	Post Office Address (Street, City, State, Country)	Citizenship
William D. Thomas Jr.	Somerville, MA, U.S.A.	89 Conwell Avenue Somerville, MA 02144	USA
Signature: (See attached Pg 4)			Date:

Full Name (First, Middle, Last)	Residence Address (City, State, Country)	Post Office Address (Street, City, State, Country)	Citizenship
Paul J. Giannasca	Newton, MA, U.S.A. Westford	369 Lexington Street PG Newton, MA 02466-4126	USA
Signature: 			Date: 4/26/05

Full Name (First, Middle, Last)	Residence Address (City, State, Country)	Post Office Address (Street, City, State, Country)	Citizenship
Zherui Zhang	Cambridge, MA, U.S.A. Waltham	362 Rindge Avenue #8 Cambridge, MA 02140-4126	China USA
Signature: 			Date: 4/27/05

Full Name (First, Middle, Last)	Residence Address (City, State, Country)	Post Office Address (Street, City, State, Country)	Citizenship
Wende Lei	Cambridge, MA, U.S.A. Waltham	362 Rindge Avenue #8 Cambridge, MA 02140-4126	China USA
Signature: 			Date: 4/27/05

Full Name (First, Middle, Last)	Residence Address (City, State, Country)	Post Office Address (Street, City, State, Country)	Citizenship
Thomas P. Monath	Harvard, MA, U.S.A.	21 Finn Road Harvard, MA 01450	USA
Signature: 			4/26/05 Date:

I hereby appoint the attorneys and/or agents associated with customer number 21559 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Address all correspondence relating to this application to the address associated with customer number 21559.

Address all telephone calls to: Susan M. Michaud, Ph.D. at 617-428-0200.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name (First, Middle, Last)	Residence Address (City, State, Country)	Post Office Address (Street, City, State, Country)	Citizenship
William D. Thomas Jr.	Somerville, MA, U.S.A.	106 Shore Dr Somerville, MA 02145	USA
<i>W.D.T.</i>			Date:
Signature: <i>W.D.T.</i>			

Full Name (First, Middle, Last)	Residence Address (City, State, Country)	Post Office Address (Street, City, State, Country)	Citizenship
Paul J. Giannasca	Newton, MA, U.S.A.	369 Lexington Street Newton, MA 02465	USA
			Date:
Signature:			

Full Name (First, Middle, Last)	Residence Address (City, State, Country)	Post Office Address (Street, City, State, Country)	Citizenship
Zhenxi Zhang	Cambridge, MA, U.S.A.	382 Rindge Avenue #8 Cambridge, MA 02140	China
			Date:
Signature:			

Full Name (First, Middle, Last)	Residence Address (City, State, Country)	Post Office Address (Street, City, State, Country)	Citizenship
Wende Lei	Cambridge, MA, U.S.A.	382 Rindge Avenue #8 Cambridge, MA 02140	China
			Date:
Signature:			

Signatures
Page 2 of 3
4 of 4